## OFFICE OF THE MISSISSIPPI SECRETARY OF ST

## STATEMENT OF ORGANIZATION FOR A POLITICAL COMMITTEE

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		LECTIO				ION	E

1.	Name of committee FRIENDS of LUCIEN Smith						
2.	Address of committee P. O. Box 22587						
	City, State, Zip JACKSON, MS 39225 Email CUCTEN SMITH Q 9MAIT.						
	Phone 601-961-9900 FAX						
	Contact Person LUCIEN Sm. +4 Phone 601-961-9900 Email CUCIEN SM. +4 Pg						
	Contact Full Address P.O. TOOK 22587 JACKSON, MS 39225						
<b>3.</b> <b>4</b> .	Is the committee registered with the Federal Election Commission (FEC)? Yes FEC Identification Number No  If the committee is authorized by a candidate:						
	Name of Candidate Address						
	Office soughtParty						
5.	Describe, as concisely as possible, the purpose of this committee and, if applicable, the identification of affiliated or connected organizations:  OFFSET COSTS ASSOCIATED WITH LUCIEN SMITH'S EXPLORATION  OF A NUN FOR STATE OFFICE						
6.	Names and addresses of all officers: (attach separate sheet if necessary)						
	A. Name JANET MANN Office TREASURER						
	Address Office Office						
	C. NameOffice Address						
	D. NameOffice						
7.	Director JANET MANN JAMM 12-30-10 (Type Name) (Signature) (Date)						
8.	Treasurer ANET MANN (Signature) (Date)						

Send To:

 Political Committees associated with statewide or multi-county elections should return the form to: Delbert Hosemann, Secretary of State, Elections Division, P.O. Box 136, Jackson MS 39205.

 Political Committees associated with single county elections should return this form to their County Circuit Clerk

3. Political Committees associated with municipal elections should return this form to their Municipal Clerk.